

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2008 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 0879-0310P	
Application Number 09/833,649-Conf. #1743		Filed April 13, 2001	
For IMAGE DATA TRANSMITTING DEVICE AND METHOD			
Art Unit 2622		Examiner Y. K. Aggarwal	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	One month (37 CFR 1.17(a)(1)) Two months (37 CFR 1.17(a)(2)) Three months (37 CFR 1.17(a)(3)) Four months (37 CFR 1.17(a)(4)) Five months (37 CFR 1.17(a)(5))	<u>Fee</u> \$120 \$460 \$1050 \$1640 \$2230	<u>Small Entity Fee</u> \$60 \$230 \$525 \$820 \$1115
<div style="display: flex; justify-content: space-between;"> \$ </div> <div style="display: flex; justify-content: space-between;"> \$ </div> <div style="display: flex; justify-content: space-between;"> \$ </div> <div style="display: flex; justify-content: space-between;"> \$ </div> <div style="display: flex; justify-content: space-between;"> \$ </div>			
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> . I have enclosed a duplicate copy of this sheet.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.			
<div style="text-align: center;">Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</div>			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>39,491</u>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34.			
<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>April 21, 2008</u> Date </div> </div>			
<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <u>Michael R. Cammarata</u> Typed or printed name </div> <div style="text-align: center;"> <u>(703) 205-8000</u> Telephone Number </div> </div>			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of <u>1</u> forms are submitted.			